

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

| | | | |
|---|--|---|--------------|
| 1 Date of Request: | 3/30/04 | 2 Serial/Patent # | 10/684,852 |
| 3 Please refund the following fee(s): | | 4 PAPER NUMBER | 5 DATE FILED |
| <input type="checkbox"/> Filing | | | \$ |
| <input type="checkbox"/> Amendment | | | \$ |
| <input type="checkbox"/> Extension of Time | | | \$ |
| <input type="checkbox"/> Notice of Appeal/Appeal | | | \$ |
| <input checked="" type="checkbox"/> Petition | | 2/05/04 | \$ 130 |
| <input type="checkbox"/> Issue | | | \$ |
| <input type="checkbox"/> Cert of Correction/Terminal Disc. | | | \$ |
| <input type="checkbox"/> Maintenance | | | \$ |
| <input type="checkbox"/> Assignment | | | \$ |
| <input type="checkbox"/> Other | | | \$ |
| | | 7 TOTAL AMOUNT OF REFUND | \$ 130 |
| 8 TO BE REFUNDED BY: | | | |
| 10 REASON: | | Treasury Check | |
| <input type="checkbox"/> Overpayment | | <input checked="" type="checkbox"/> Credit Deposit A/C #: | |
| <input type="checkbox"/> Duplicate Payment | | 9 | 50-2960 |
| <input checked="" type="checkbox"/> No Fee Due (Explanation): | Postcard proves allegedly omitted figs were here on day 1. Refund pet fee | | |
| 11 REFUND REQUESTED BY: | | TITLE: Pet Atty | |
| TYPED/PRINTED NAME: E. Shirene Willis | | PHONE: 308-6712 | |
| SIGNATURE: <u>E. Shirene Willis</u> | | | |
| OFFICE: Office of Petitions | | ***** | |
| ***** THIS SPACE RESERVED FOR FINANCE USE ONLY: ***** | | | |
| APPROVED: <u>Alma Miller</u> | | DATE: 3/30/04 | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B